

City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 16 B St, Peaks Island, ME 04108
 Owner: Danieli, Phyllis
 Owner Address: 16 B St, Peaks Island, ME 04108
 Leasee/Buyer's Name: Danieli, Phyllis
 Contractor Name: McTigue Construction
 Address: 97 Brackett Ave, XXXX Peaks Isl, ME 04108 766-2676
 Past Use: 1-fam
 Proposed Use: Same
 Permit No: 961065

PERMIT ISSUED
 Permit Issued: OCT 24 1996
CITY OF PORTLAND

Proposed Project Description: Enlargen existing bathroom as per plans
 FIRE DEPT. Approved Denied
 INSPECTION: Use Group: Type:
 Signature: [Signature]
 Signature: [Signature]
 PEDESTRIAN ACTIVITIES DISTRICT (P.O.D.)
 Action: Approved Approved with Conditions Denied
 Signature: [Signature] Date: [Date]
 Permit Taken By: Mary Gresik
 Date Applied For: 17 October 1996

Zone: CRL 090-Q-010
 Zoning Approval: [Signature] 10/23/96
 Special Zone or Review:
 Shoreland Not in
 Wetland
 Flood Zone
 Subdivision
 Site Plan major minor mm

- This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
- Building permits do not include plumbing, septic or electrical work.
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work.

Debris to be removed by P/U

Zoning Appeal
 Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied
Historic Preservation
 Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:
 Approved
 Approved with Conditions
 Denied
 Date: 10/17/96
 [Signature]

CERTIFICATION
 I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: [Signature] Bob McTigue
 ADDRESS: [Address]
 RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: [Signature]
 DATE: 17 October 1996
 PHONE: [Phone]

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT 6
 [Signature]